

# EASTERN HEALTH COLLABORATIVE EXECUTIVE TEAM MEETING

6/1/2016  
7:00AM TO 8:00AM  
FAMILY FIRST MEDICAL

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ATTENDEES: Boyd Southwick DO, James Corbett, Corinne Bird, and Madi Orndorff

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## MINUTES

AGENDA ITEM:	IHDE and The Hospital Cooperative
PRESENTER:	Boyd Southwick

### DISCUSSION:

James was able to get a hold of Robert Cuiuo. He let James know The Hospital Cooperative is not interested in connecting to IHDE. The group was meeting with the Commonwell Health Alliance last week. They are trying to learn more about the alliance. CommonWell Health Alliance is devoted to the simple vision that health data should be available to individuals and providers regardless of where care occurs. Additionally, provider access to this data must be built-in health IT at a reasonable cost for use by a broad range of health care providers and the people they serve. The cooperative is interested in this program because it is a nationwide program, and it is significantly less expensive than IHDE. The Hospital Cooperative is comprised of 14 hospitals in Southeast Idaho and West Wyoming: Bear Lake Memorial Hospital, Bingham Memorial Hospital, Caribou Memorial Hospital, Eastern Idaho Regional Medical Center, Franklin County Medical Center, Lost Rivers Medical Center, Madison Memorial Hospital, Minidoka Memorial Hospital, Nell J. Redfield Memorial Hospital (Oneida County), Portneuf Medical Center, Power County Hospital District, Star Valley Medical Center, Steele Memorial Medical Center, and Teton Valley Hospital.

AGENDA ITEM:	IHC Meeting Update
PRESENTER:	James Corbett

### DISCUSSION:

It is our RC's turn to present to the IHC for the next meeting. Dr. Southwick and Geri cannot attend the meeting so James will present to the group. At this meeting we are also supposed to express any concerns the group has. James addressed a few concerns; lack of IHDE data and referral management (we raised this concern in February and nothing has been done). Dr. Southwick mentioned that EIRMC does have a referral management center called the access center, and anyone in the medical community can utilize it.

ACTION ITEM	PERSON RESPONSIBLE	DEADLINE
▪ Presentation moved to the July IHC meeting	James	7/13/2016

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AGENDA ITEM:	RC Networking Forms
PRESENTER:	Group

### DISCUSSION:

We haven't had much response from the forms. Some clinics are more invested in making the transition than others. Dr. Southwick said the internal systems need to be willing and open to change. We need to have the clinics see the need and benefits to want to change. Even though they signed up for this grant, it doesn't mean they are fully willing to change. James proposed that we make time in the RC meeting for the clinics to go over the networking form.

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AGENDA ITEM:	RC Agenda
PRESENTER:	Group

## DISCUSSION:

James went over the fishbone from last meeting. He thinks it would be beneficial for the upcoming RC meeting to be 'back to the basics'. He wants to remind the group the reasoning behind PCMH transformation, and have them identify what the RC can do to help achieve the quadruple aim. He would like to work more as a group rather than individual clinics. The group could pick a factor from the fishbone to work on and solve. James isn't sure the networking form has been beneficial for the clinics or the group. He wants to incorporate it into the meeting more. Clinics could share areas they are succeeding at, and give some ideas for other clinics to achieve. Clinics could also identify barriers to transforming their clinic into the PCMH model. If there is time this meeting, we will move onto tobacco. The overall hope of the meeting is to identify gaps so the RC can facilitate medical health neighborhood development.

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## OTHER BUSINESS AND FUTURE AGENDA ITEMS:

The Hospital Cooperative

## NEXT MEETING

DATE: 7/6/2016

TIME: 7:00AM

LOCATION: Family First Medical